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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/749,752			ing Date 30/2003	To be Mailed
APPLICATION AS FILED – PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY □ OR SMALL ENTITY OR SMALL ENTITY												
	FOR	N	NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A			N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A			N/A]	N/A	
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A			N/A]	N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•			x s =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•			x \$ =		1	X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			oplication size fee due Il entity) for each r fraction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1		
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL	
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY												
AMENDMENT	05/02/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 31	Minus	** 31		-		x s =		OR	x s =	
	Independent (37 CFR 1.16(h))	• 4	Minus	4		-		X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	*	Minus	:				x \$ =		OR	x s =	
	Independent (37 CFR 1 16(h))		Minus	***				X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "20". TAMMY ACREE/ * If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" [Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, process an application. Confidentially is governed by 80 U.S. U. 2000 To CHT H. 10.6 robeston a destinated to take 12 minutes to compute, including gight engine required compute first form and/or suspections for reducing the burden, should be sent to the Child Information Officer. U.S. Patient and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, W. 22813-1450.